L13000113701

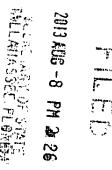
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	1
Opecial instructions to	r imig Officer.	
	AUG :	1 2 2013
	A . I	LUNT

Office Use Only



700250172067

08/08/13--01017--012 **125.00



(850) 245-6051.

COVER LETTER

10: Registration Section Division of Corporations
SUBJECT: Pineapple Properties of SWFL LLC. Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dan Tavanese Name of Person
Pineapple Properties of SWAL LEC. =
1109 SE 23rd Terrace Si do I
Cape Coral Fl 33990
dan tavanese O Jahoo Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dan Tavanese at (239) 246 - 7486 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times 130.00 Filing Fee \& Certificate of Status \$\times 255.00 Filing Fee \& Certificate of Status \$\times 255.00 Filing Fee \& Certificate of Status \& Certificate of Status \& Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Pine apple Proper ties of (Must end with the words "Limited Liability	of SWFL LLC. y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1109 SE 2210 Ter	Samo
CAPE CORAL FI 33990	
Cape Cofal City, State Having been named as registered agent and to ac	gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent are: Compared Agent. You must designate an individual or another gistered agent
liability company at the place designated in the registered agent and agree to act in this capacit all statutes relating to the proper and complete	is certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of performance of my duties, and I am familiar with istered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Jody Tavanese 1109 SE 2319 Terr Cape Coral FI 33990
marm	Dan Tavanese 1109 SE 2310 Terl Cape Coval, El 33990
	¥. 23
(Use attachment if necessary) RTICLE V: Effective date, if other than the date of filing:	
REQUIRED SIGNATURE:	
Signature of a member of	or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Dan Javan ese Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)